Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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	will generate another cover sheet.	
To:		2
10.	Division of Corporations	5.7
	Fax Number : (850) 617-6381	000 V
From:		<u> </u>
	Account Name : FASTKIT CORP	
	Account Number : I2C100000009	:= 0°
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

FLORIDA LIMITED LIABILITY CO.

Rebecca King Ferraro, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

N. SAMS May 25 2017

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Rebecca King Ferraro, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address: P.O. Box 2273 Stuart, Plorida 34995-2273

Street Address: 10 Middle Road Stuart, Florida 34996

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Nicholas A. Ferraro

Name

3601 SE Ocean Boulevard, Suite 005

Florida street address (P.O. Box not acceptable)

Stuart, Florida 34996

City, State and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605 F.S.

Registered Agent's Signature

Ferraro & Ferraro, CPAs, PA 3601 SE Ocean Boulevard, Ste. 005 Stuart, Florida 34996 772-283-5001

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ARTICLE IV - Manager(s) or Managing Member(s):

17 MAY 24 *** = 00

The name and address of each Manager or Managing Member is as follows:

SELE WAY OF STATE TALL AHASSEE, FLORIDA

3:

Title

"MGRM" - Managing Member

Name and Address:

P.O. Box 2273 Stuart, Florida 34995-2273				
				

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

(In accordance with section 605, 0203 Florida Statutes, the execution of the document constitutes an affirmation under penalties of perjury that the facts stated herein are true)

Rebecca King Ferraro

Typed or printed name of signee

Ferraro & Ferraro, CPAs, PA 3601 SE Ocean Boulevard, Suite 005 Stuart, Florida 34996 772-283-5001